MENTAL HEALTH EVALUATIONS

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A Guide to the MHE

- Bases for referral
- Types of referrals
- Procedural steps and member's rights

BASES FOR REFERRAL

- The *only* bases for referral are:
  - When the member presents an immediate danger to him/herself, to others, or to government property; or
  - When the member's behavior gives the commander sincere reason to believe he/she is suffering from a legitimate mental health problem that may affect that member's ability to carry out the mission (i.e. that renders member "unfit for duty").

2 TYPES OF REFERRALS

- Emergency Admission for Inpatient Evaluation
  - Member considered an immediate threat to him/herself, to others, or to government property
- Non-Emergency Outpatient MHE
  - Most common
  - Focus of our seminar

PROCEDURAL STEPS AND A MEMBER'S RIGHTS

- Contact the Mental Health Professional (MHP)
- Referral Letter and notice to member
- MHP Response
- Notice to member after favorable MHP response

STEP1:
CONTACT THE MHP

- The MHP will usually be located at the active duty facility nearest to your unit. Coordinate with your clinic commander to identify the MHP.

- Give the MHP a “heads-up” by telephone that a referral letter is coming.

STEP 2: THE REFERRAL LETTER

- Include a brief statement of the member's prior record, the circumstances of the request, any known history of mental health treatment (with provider's records of treatment, if available), and why an MHE is necessary.
- Conclude by asking the MHP whether he/she believes there is a basis for a mental health referral.
- Request written response from the MHP

NOTICE TO THE MEMBER AT THIS STAGE

- Member does *not* have to be notified unless/until the MHP has responded favorably to the request.
- As practical matter, if obtaining records of prior civilian mental health treatment that are not included in the military records, may have to notify the member of pending MHE request. If the MHE request is made known to member before the MHP's response, advise member of his/her right to free military counsel before asking for consent to release civilian mental health records

STEP 3: MHP RESPONSE

- If the MHP responds that there is not a basis for an MHE, then that ends the matter
- If MHP agrees there is a basis for a MHE, schedule an appointment for the member's outpatient MHE.
- If MHE cannot be accomplished on a UTA weekend, put member on military orders for the MHE

STEP 4: NOTICE AFTER FAVORALBE MHP RESONPSE

- Enclosure 4 to DoD instruction 6490.4 is the format for the notice to the member. **FOLLOW IT!**
- For technicians or traditional guard members, include a paragraph in the letter that the member is ordered to attend the appointment. Include military orders with the notice letter.
- Include a written acknowledgment of receipt, and specify a time for the member to return said acknowledgement.

MEMBER'S RIGHTS

- To consult with a JAG concerning redress if Air Force instructions are not followed
- To complain to an ANG, State, or DoD Inspector General that the commander made the MHE referral in violation of the applicable instructions
- To make lawful communications to an IG, attorney, member of Congress, or other authority about the MHE referral

MEMBER'S RIGHTS, cont.

- To request a second opinion from a MHP of the member's choosing if the MHP is reasonably available (if the MHP is not a ember or employee of the guard or DoD, the second opinion will be at the member's expense.
- To treatment that is the most appropriate and therapeutic available, in a setting no more restrictive than it must be for effective treatment

MEMBER'S RIGHTS, cont.

- To a two workday waiting period (AGRs) or seven day waiting period (technicians and traditional guardsmen) from the time of notice until the time of the MHE.
- Exception: if the circumstances of military duty prevent complying with this right, the member's commander must specify the reasons for a more expedient non-emergency referral when notifying member.

FAILURE TO APPEAR AT THE MHE

- If the member does not report for the MHE, treat it as you would any other failure to report pursuant to a lawful order.

- Failure to obey a lawful order independently subjects the member to adverse action.

STEP 5: ACTION UPON RECEIPT OF MHE RESULTS

- Look for the MHP's written report with a recommended course of action and treatment the member should follow

- If "fit for duty," quality force management actions are limited beyond a change of duty assignment or work station.

STEP 5: (cont)

- If “unfit for duty,” may be a basis for administrative discharge processing, a medical evaluation board,or a profile change
  - This should not be a basis for punitive action.

COMMON PITFALLS

- FAILURE TO FOLLOW THE SPECIFIC GUIDANCE IN DoDI 6490.4 – ESPECIALLY Enclosure 4 – Notice to member

- WARNING: DO NOT EVER USE MHR AS A REPRISAL ACTION

QUESTIONS/COMMENTS / CONFUSION?